

| POSITION                  | INITIALS         | ID NO.      | DATE            |
|---------------------------|------------------|-------------|-----------------|
| FEE DETERMINATION         | <i>Robert Co</i> |             | <i>11-29-01</i> |
| O.I.P.E. CLASSIFIER       | <i>2A</i>        | <i>32</i>   | <i>12/10</i>    |
| FORMALITY REVIEW          |                  | <i>1120</i> | <i>12-14-01</i> |
| RESPONSE FORMALITY REVIEW |                  |             |                 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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